

| POSITION | INITIALS | ID NO. | DATE |
|---------------------|----------|--------|-------------------|
| FEE DETERMINATION | AS | | 11/28/99 |
| O.I.P.E. CLASSIFIER | | | 11-24-99 |
| FORMALITY REVIEW | | 69055 | 12-7-99 3-8-00 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 — (Through numeral)... Canceled A Appeal
 -+ Restricted O Objected

| Claim | Date |
|----------|---------|
| Final | |
| Original | |
| 1 | 3/19/02 |
| 2 | 6/12/01 |
| 3 | 3/5/04 |
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| Claim | Date |
|----------|---------|
| Final | |
| Original | 9/9/02 |
| 51 | 6/12/03 |
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| Claim | Date |
|----------|--------|
| Final | |
| Original | 9/9/02 |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here